

BIOGRAPHICAL SKETCH

NAME Nina J. Solenski	POSITION TITLE Associate Professor of Neurology – Tenure Track		
eRA COMMONS USER NAME			
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education,</i>			
INSTITUTION AND LOCATION	DEGREE (if applicable)	YEAR(s)	FIELD OF STUDY
Southern Conn. State Univ., New Haven, CT Jefferson Medical College, Philadelphia, PA Dartmouth-Mary-Hitchcock Memorial Hospital, Hanover, NH	B.S. M.D.	1977-81 1985-89 1989-90	Chemistry Medicine Medicine Internship

A. Positions and Honors:

1990-1993 Neurology Residency Training, Dept. of Neurology, University of Virginia, Charlottesville, VA

1993-1994 Cerebrovascular Fellowship, Clinical Stroke Training -Department of Neurology, University of Virginia, Charlottesville, VA; E. Clarke Haley, Jr., M.D., Preceptor

1994-1996 Cerebrovascular Fellowship, Research Training, Departments of Neurology and Neurosurgery, University of Virginia, Charlottesville, VA; Kevin S. Lee, Ph.D. and Neal F. Kassell, Preceptors

2001-Present Faculty Member - UVA Neuroscience Graduate Program

2003-Present Associate Professor of Neurology, Department of Neurology, University of Virginia, Charlottesville, VA; G. Frederick Wooten, M.D., Chairperson.

2001,2005 American Academy Neurology and Psychiatry-dual boarded (General Neurology & Stroke)

Committee - Membership:

1996-present Society for Neuroscience

1998-present American Heart Association (AHA)-Affiliate State Representative (Liaison) Mid-Atlantic

1996-present American Heart Association (AHA)-General and Fellow Member of the Council on Stroke

currently "American Stroke Association"(ASA)

2001 -2002 Virginia Neurological Society

1997-2000 Affiliate Virginia Stroke Task Force Member, Co-Chairman Professional Education,

1997-present American Academy of Neurology (AAN): Associate Fellow-AAN Stroke & Vascular Neurology Sec.
 2004-present ASA-Stroke Volunteer Forum (invitation)
 2005-present Team Leader -American Heart Association: "Virginia Stroke Systems Plan" (20 member panel)
 2007 Virginia Joint Commission of Health Stroke Task Group – nominee
 (confirmation pending 05/0)

Invited Presentation/Participation (selected):

2004 University of Gotenborg, Gotenborg, Sweden. "Mitochondria Movements during Hypoxia-Reoxygenation- Implications for Neuronal Cell Death" Host: Dr. Hendrik Hagberg
 2005 Gordon Research Conference: Oxidative Stress and Disease, "Nitrosative Stress in Acute and Chronic Neurodegenerative Disorders" March 13-18th ,2005, Ventura, CA.
 2006 Maryland-Washington D.C.-Virginia - Stroke Leadership Meeting – invited Virginia Representative
 2006 Stroke Therapy Academic Industry Roundtable (STAIR)V – Faculty Member,March 2006, Chairperson – Dr. Marc Fisher.
 2007 Appalachian Summit for Cardiovascular Health (multistate event - invited Stroke Expert)
 2007 Virginia EMS Annual Mtg - invited co-lecturer (pending)

Invited Research Grant Reviewer:

1998-2001 American Heart Association (AHA), Affiliate Brain/Stroke Study Peer Review - Member
 2002 NIH-National Heart Lung and Blood Institute – Extramural Reviewer (ad hoc)
 2005-present NIH-Brain Disorders and Clinical Neuroscience IRG (BDCN) – Brain Injuries and Neurovascular Pathologies Study Section -Permanent Member
 2007-present AHA-American Stroke Association ,National Brain/Stroke Grant Peer Review - Member

B. Selected (Clinical) Original Publications:

SOLENSKI N.J., Haley E.C., Kassell N.F., Kongable G., Germanson T., Truskowski L., Tomer J.C. Medical complications of aneurysmal subarachnoid hemorrhage: a report of the Cooperative Aneurysm Study. *Crit Cure Med* 23:1007-1017, 1995.
 SOLENSKI N.J. Thrombolytic therapy for acute ischemic stroke. *Virginia Med Quart* 2:128-130, 1998.
 SOLENSKI N.J., Adams R. Cerebrovascular disease - ischemic stroke. *Current Opinion in Critical Cure* 5:102-106, 1999.
 SOLENSKI, N. J. Transient ischemic attacks: Part I. Diagnosis and evaluation. *Am Fam Physician*.;69: 1665-74, 2004.
 SOLENSKI, N.J. Transient ischemic attacks: Part II. Treatment. *Am Fam Physician* 69: 1681-1688, 2004.

SOLENSKI, N.J. Information from your family doctor. Strokes and TIAs. *Am Fam Physician* 69:1679-1680, 2004.

SOLENSKI N.J., **The neurologic complications of infectious endocarditis.** In: *Neurological Infectious Diseases and Therapy*, Roos K.L., Editor. MacGraw-Hill, 2004.

SOLENSKI N.J., Fiskum G., Rosenthal R. Ischemic brain injury In: *Foundations of Anesthesia: Basic and Clinical Sciences*. 2nd edition (textbook) Elsevier Science, 2005 [annual update],

SOLENSKI N.J. "Novel risk factors for stroke prevention" – for *Current Drug Targets*- Invited Review – accepted 10/06 – pending publication.

*Dumont, A., *Chang, C., Simsek, S., Titus, B., Kwan, A., Kassell, N., SOLENSKI, N.J. The adenosine 2A receptor agonist ATL-146e attenuates experimental post-hemorrhagic vasospasm. Accepted *Neurosurgery* – 12/06.

Braithwaite, S and SOLENSKI, N.J. Analysis of EMS Stroke Systems Readiness: Virginia's Model. Submitted *Stroke* – 04/07 - review in progress.

C. Clinical Trials (selected):

1991 Tissue Plasminogen Activator for Acute Ischemic Stroke (rt-PA), NM-NINDS

1996-97 GAIN I, GAIN II (Gavestinel, GlaxoWellcome)

1997 APLAUD SB214857 (SmithKline Beecham)

1997 LUB-USA-6 Study (Lubeluzole/t-PA, Janssen)

1997 PROACT II – Prolyse in Acute Cerebral Thromboembolism (Abbott)

1999-2000 BRAVO – Blockade of the GP IIb/IIIa Receptor to Avoid Vascular Occlusion, (SmithKline Beecham)

1999 WASID – Warfarin Aspirin Symptomatic Intracranial Disease, NM-NINDS

2000 HALT – Hu23F2G Anti-Adhesion to Limit Cytotoxic in Stroke

2000-2005 Prospective Validation of a Stroke Predictive Model – ASAP, NM-NINDS

2001-2002 ARTIST – AMPA Receptor Antagonist Treatment in Ischemic Stroke (YM872) Yamanouchi U.S.

2001-2003 AAASPS (African-American Antiplatelet Stroke Prevention Study)

2001-2003 Pilot Study of TNK-TPA in Acute Ischemic Stroke (TNK-S) NM-NINDS

*2002 SWISS - Siblings With Ischemic Stroke Study. (PI - James F. Meschia) NIH-NINDS

*2002 ISGS - The Ischemic Stroke Genetics Study. (PI - James F. Meschia), NIH-NINDS

2003-2004 AbESTT-II - Abciximab (ReoPro) in Acute Ischemic Stroke: Phase III- (Centocor and Eli Lilly)

2003-2004 Pilot Study of TNK in Acute Ischemic Stroke (TNK-S) Phase II- NM-NINDS

*2004 IRIS – Insulin Resistance Intervention after Stroke Trial- NM-NINDS

*2005 TNK in Acute Ischemic Stroke (TNK-S) Phase IIB- NM-NINDS

*2005 CLEAR-IVH – Clot Lysis: Evaluating Accelerated Resolution of Intraventricular Hemorrhage: rt-PA Treatment of Brain Hemorrhage- (Genentech/FDA Orphan drug)

*2006 Recombinant Factor VIIa in Acute Intracerebral Hemorrhagic – (NovoSeven)

*2006-p Carotid Revascularization Endarterectomy Versus Stenting Trial (CREST) – NIH-NINDS

*2006-p Albumin in Acute Stroke Trial (ALIAS) – site Principle Investigator (main P.I. Myron Ginsberg) – NM-NINDS

* CURRENT

D. Completed Research Support:

Ischemia” Title: “Free Radical Injury in Reversible Brain

Agency: NM-NINDS Mentored Clinical Scientist Development
Award (K08NS01857)
Period: 9/1996 -9/2001
Role: P.I.
Effort: 75%
Award*: \$493,857

Title: “Free Radical Injury in Reversible Brain Ischemia”
Agency: American Heart Association (AHA) Beginning Grants-in-
Aid (VA97GB3)
Period: 7/1997-7/1999
Role: P.I.
Effort: 75%
Award*: \$55,000

Model” Title: “Evaluation of TAK-218 in a Rat Ischemia/Reperfusion

Agency: Takeda Pharmaceutical Company
Period: 6/1997
Role: P.I.- in collaboration with Drs. Neal F. Kassell and
Greg A. Helms, Department of Neurological Surgery

Title: “The Role of Mitochondria in Hypoxia-Induced Neuronal Death”
Agency: American Federation of Aging Research (AFAR)(P00146)
Period: 9/2000-9/2002
Role: P.I.
Award*: \$50,000

Mitochondria” Title: “Effect of Low Emission Laser on Neuronal

Agency: PhotoThera Incorporated
Period: 2/01/2004-8/01/2005
Role: Co-P.I. – 25 % effort
Award: \$180,000

Title: “Steady-State Pharmacokinetics of 30-300 Milligrams Daily
Doses of R(+) Pramipexole in Amyotrophic Lateral Sclerosis”
Agency: Dr. James Bennett, Sponsor: Department of Neurology -
Gift Fund

Period: 01/2006- 03/2007
Role: P.I. – 20 % effort

CURRENT Research Support:

Title: “Albumin in Acute Stroke (ALIAS) Trial; Phase IIP”
Agency: NIH-NINDS – University of Miami – Coordinating site
Period: 01/2006-present
Role: Local -P.I. – 25 % effort
Award: \$7000/subject

Title: The Effect of Nitric Oxide on GABAergic Synaptic Transmission in the Immature Brain
Agency: Beginning-Grant-Aid – American Heart Association to
Dr. Santina Zanelli (Post-Doctoral Fellow) is **PI**
Role: Consultant – 10%

Karen R. Jackson
11 Church Street
Poquoson, Virginia 23662
757-869-7129 (cell)
karen@cit.org

Director, Office of Telework Promotion and Broadband Assistance
2006- Present
Commonwealth of Virginia, Richmond, Virginia

September

- Promote and encourage use of telework alternatives for public and private employees
- Support the efforts of both public and private entities within the Commonwealth to enhance or facilitate the deployment of, and access to competitively priced, advanced electronic communications services (commonly known as “broadband”) and Internet access services of general application throughout the Commonwealth.
- Specifically work towards establishing affordable, accessible broadband services to underserved areas of the Commonwealth and monitor advancements in communication that will facilitate this goal.
- Advocate for, and facilitate the development and deployment of applications, programs and services that will bolster the usage of and demand for broadband level telecommunications
- Serve as a broadband information and applications clearinghouse for the Commonwealth and a coordination point for broadband related services and programs in the Commonwealth.
- Advise the Secretary on broadband adoption, deployment and application issues.
- Coordinate activities regarding telework with, and regularly report to, a board consisting of the Secretaries of Administration, Commerce and Trade, Finance, Technology and Transportation.

Vice President, Broadband Programs
September 2006

July 1999 -

Virginia’s Center for Innovative Technology (CIT), Newport News, Virginia

Program Activities

- Represent Virginia’s Secretary of Technology in matters pertaining to broadband and rural development.
- Insure that all regions of the Commonwealth have equal access to economic development and quality of life opportunities offered by broadband telecommunications.
- Responsible for providing vision and coordination for the development of broadband telecommunications
- Serve as an independent consultant to communities embarking on broadband related initiatives.

- Develop regionally based programs targeted toward solving the “digital” needs of small and medium sized businesses and rural/underserved communities.
- Act as a catalyst for the formation of partnerships between educational institutions, industry, and the public sector to facilitate rural broadband service delivery and training.
- Perform in depth analyses at the community level and devise affordable broadband solutions based on current service availability, constituent needs, and regional economic and demographic trends.
- Act as an advocate for rural communities seeking to develop and deploy broadband solutions.
- Benchmark Virginia’s level of broadband deployment to other States and devise strategies and programs to improve the ranking.
- Oversee the delivery of e-Commerce and Broadband related outreach services across the Commonwealth to more than 50 constituents annually.

Legislative Activities

- Drafted Executive Order 35 establishing the Office of Telework Promotion and Broadband Assistance (2006)
- Drafted Legislative Language (HB1816) and provided position/impact statements on telecommunications related issues (Virginia General Assembly Session 2003).
- Researched and authored, on behalf of the Virginia’s Secretary of Technology (George Newstrom), the Final Report on “Advancing Affordable, High-bandwidth Electronic Networks in Rural Virginia” to the Governor and General Assembly of Virginia as directed by House Joint Resolution 163 (2002).
- Researched and authored, on behalf of Virginia’s First Secretary of Technology (Donald Upson), “Building a Digital Community: A Leadership Guidebook” (2001).
- Convened Virginia Governor Gilmore’s “Main Street to e-Street” and “e-Communities” Task Forces and produced Virginia Governor Gilmore’s Final Meeting of the Governor’s Commission on Information Technology.

Leadership Activities

- Served as Co-Chair, Subcommittee on Economic Development Incentives, for Virginia Attorney General Jerry Kilgore’s Task Force on Regulatory Reform and Economic Development.
- Broadband Program Coordinator, Office of the Secretary of Technology, COVITS (Commonwealth of Virginia Information Technology Symposium) 2002.
- Member, Virginia Joint Commission on Technology and Science Electronic Medical Records Advisory Committee

Regional Director 1995–1999

Virginia’s Center for Innovative Technology, Newport News, Virginia

- Worked closely with companies to identify their business and technology needs
- Located and engaged university and private resources to assist in the development of new technologies and products.

- Assisted local technology companies in obtaining in **excess** of \$700,000 in grant funding.
- Maintained a client base in excess of 100 companies.
- Spearheaded effort to raise the awareness and use of Electronic Commerce in the Hampton Roads Area through the Southeastern Virginia Regional Network – a group now nurturing more than 100 companies in the **use** of Electronic Commerce and Internet technologies.

Associate Information Design Specialist**1994-1995****Computer Sciences Corporation, Hampton, Virginia**

- Co-authored a 2 day introductory UNIX System Administration course.
- Authored a 3 day advanced UNIX System Administration course.
- Performed UNWAIX system administration functions including: back up and recovery, user and queue management, scripting, and troubleshooting.
- Editor, “The Training Innovator”, the division’s quarterly publication.

Education

- **The College of William and Mary Graduate School of Business, Williamsburg, Virginia**
Master of Business Administration Degree, May 1991.
- **Christopher Newport University, Newport News, Virginia**
Bachelor of Science in Business Management, Cum Laude, May 1987.

APPENDIX C – LETTERS OF SUPPORT

RICK BOUCHER
Srs. District, Virginia

ENERGY AND COMMERCE

TELECOMMUNICATIONS AND INFORMATION TECHNOLOGY

TELECOMMUNICATIONS AND INFORMATION TECHNOLOGY

TELECOMMUNICATIONS AND INFORMATION TECHNOLOGY

TELECOMMUNICATIONS AND INFORMATION TECHNOLOGY

TELECOMMUNICATIONS AND INFORMATION TECHNOLOGY



Congress of the United States
House of Representatives

April 18, 2007

WASHINGTON OFFICE
200 KENNEDY DRIVE, SUITE 2000
WASHINGTON, DC 20540
(202) 225-4000
E-MAIL: RICHARD.BOUCHER@HHS.GOV
WWW: WWW.HHS.GOV/STROKE

CONSTITUENT SERVICE OFFICES:

DEADLY MAIL, EVERY
ADDRESS, OFFICE, 2000
(202) 225-4000

TELECOMMUNICATIONS AND INFORMATION TECHNOLOGY
200 KENNEDY DRIVE, SUITE 2000
WASHINGTON, DC 20540
(202) 225-4000

THE HOUSE OF REPRESENTATIVES, WASHINGTON, DC 20540
FAX: (202) 225-4000
WWW: WWW.HHS.GOV/STROKE
(202) 225-4000

Karen S. Rheuban MD
Senior Associate Dean
for CME and External Affairs
Medical Director of Telemedicine
University of Virginia Health System
Post Office Box 800707
Charlottesville, VA 22908

Dear Dr. Rheuban:

It is my pleasure to write in support of the proposal of the University of Virginia Office of Telemedicine to the Federal Communications Commission in response to its Report and Order to encourage greater utilization of the Universal Service Fund for Rural Health Care Providers.

I understand that the funding may be used for network design, deployment of technology and to underwrite up to 85% of the costs of connectivity to enable medical facilities in rural communities to have direct and immediate access to the medical expertise and education available at any participating medical center in the Commonwealth of Virginia.

Recognizing the high stroke mortality rate in the Commonwealth, it is evident that timely access to primary stroke centers, community hospitals and health centers, EMS providers and academic medical centers will reduce deaths due to stroke, hypertension, diabetes and heart disease. I strongly support the proposal of the University of Virginia and its partners throughout the Commonwealth and urge approval of the application by the Federal Communications Commission.

With kind regards and best wishes, I remain

Sincerely,

Rick Boucher
Member of Congress

RB/bg

IN CONFORMITY WITH
 THE PROVISIONS OF THE
 ACT OF 1906, AS AMENDED,
 THE FOLLOWING IS A LIST OF THE
 NAMES OF THE
 MEMBERS OF THE
 BOARD OF
 THE
 DISTRICT OF COLUMBIA

COMPARE THE INFORMATION
OBTAINED AND THE
FINDINGS
CONCERNING THE
EFFECTS OF THE
TREATMENT

May 1, 2007

Dear Ed Chambers,

As a State Senator for 24 years, I see on a recurring basis the increased difficulty to identify serious health issues and establishing way to deal with them. This is especially true in rural Virginia where medical care may be hours away. If this proposal is implemented, health care facilities in rural areas will be able to address related co-morbidities including high-blood pressure, diabetes, and obesity. Currently, these treatments are offered in larger metro areas.

Synonyms

H. Edward Hough

REFERENCES

SENATE OF VIRGINIA

CHARLES A. HARRIS
13th SENATORIAL DISTRICT
ALL OF PRINCE GEORGE'S COUNTY, VIRGINIA
SOUTH OF THE CITY OF LEXINGTON
AND PART OF CARROLL COUNTY
POST OFFICE BOX 49
CHARLES CITY, VIRGINIA 22027



COMMITTEE ASSIGNMENTS
AGRICULTURE, COMMERCE AND
INDUSTRY, FORESTRY, CRAFT
INDUSTRY
GENERAL LITIGATION AND TECHNOLOGY
INVESTMENT PROMOTIONS
RULES

April 27, 2007

Karen S. Rheuban, M.D.
Medical Director of Telemedicine
Senior Associate Dean for CME & External Affairs
University of Virginia Health System
Post Office Box 800707
Charlottesville, VA 22908

U. Va. Application
In Re: FOC Universal Service Fund for
Rural Health Care Providers

Dear Dr. Rheuban:

Please know my recommendation for accessing "telehealth" or "telemedicine" developments through the Universal Service Fund for Rural Health Care Providers.

In my 26 years as a Virginia legislator, many efforts have been fostered to bring appropriate medical assistance to South Central Virginia, a rural, medically under-served region with high unemployment. Currently our section is in the process of locating broadband access throughout this region with continued efforts to apply for health grants to offer increased medical services. None of our area is conveniently located to infrastructure for specialty care and ultimately implementing the clinical component for enhanced treatments would greatly increase current availabilities.

As expressed in the application, additional opportunities to address disabilities from strokes would also enhance treatments for related disorders that are leading causes of death generally recognized within our area of the Commonwealth. I must conclude disparities do exist within our region and especially the lack of immediate treatment which is underscored for surviving "heart attacks".

Please do not hesitate to let me know if I may assist your commendable efforts.

Yours truly,

A handwritten signature in cursive script, appearing to read "Charles A. Harris".
Charles A. Harris

COMMONWEALTH OF VIRGINIA



SENATE

April 30, 2007

[illegible]

1. 2014年12月31日，甲公司“应付账款”科目所属各明细科目期末贷方余额如下：应付账款—A公司100万元，应付账款—B公司200万元，应付账款—C公司150万元。甲公司2014年12月31日资产负债表“应付账款”项目期末余额为____万元。

Karen S. Riegleman, MD
Senior Associate Dean for CME and External Affairs
Medical Director of Telemedicine
University of Virginia Health System
P.O. Box 800707
Charlottesville, VA 22908

Dave De Rose

I am writing to express my full support for the University of Virginia Office of Telemedicine's proposal to the Federal Communications Commission to facilitate enhanced access to healthcare services for citizens of rural Virginia. I am quite excited about this project and the positive impact it will have on citizens in rural areas of the Commonwealth. Like the 3rd Senate District, which I am privileged to represent in the Virginia General Assembly.

It is quite encouraging that this proposal is designed to offer greater access to education and prevention programs, and specialty care where not locally available. The plan to connect healthcare centers and healthcare providers in order for patients in rural areas to have access to telehealth services will add great value to rural Virginia. The exchange of medical information within healthcare systems and across systems is an important goal to allow more affordable, more easily accessible healthcare services to rural citizens across the Commonwealth.

Again, it is with great pleasure that I express my full support for the University of Virginia Office of Telemedicine's proposal to the Federal Communications Commission to facilitate enhanced access to healthcare services for citizens of west Virginia. Thank you for your efforts to improve access to healthcare services for citizens in Southwest Virginia and throughout west Virginia. Please feel free to contact any office or me if we can ever be of further assistance to you with this important project.

John F. Pickett
Member, Senate of Virginia

100/100

141 THE
 TOWNSHIP OF PLYMOUTH

08/06/79 15:00 FAX TO DIRECTOR
FROM SAC NEW YORK (100-158741) 1P



COMMONWEALTH OF VIRGINIA
HOUSE OF DELEGATES
RICHMOND

HARVEY B. MORGAN
POST OFFICE BOX 948
GLoucester, Virginia 23061
TWENTY-EIGHTH DISTRICT

COMMITTEE ASSIGNMENTS
COMMERCE AND LABOR (CHAIRMAN)
APPROPRIATIONS
AGRICULTURE, CHEESEPLANE AND
NATURAL RESOURCES

April 26, 2007

Karen S. Rhewien MD
Senior Associate Dean for CME and External Affairs
Medical Director of Telemedicine
University of Virginia Health System
PO Box 800787
Charlottesville, VA 22908

Dear Dr. Rhewien:

I write in support of the University of Virginia (UVA) Office of Telemedicine's proposal to the Federal Communications Commission (FCC) to facilitate enhanced access to healthcare services for citizens of rural Virginia.

Identifying, diagnosing, and treating serious health issues and establishing ways to deal with them is a major challenge in rural areas. The Commonwealth's plan to target poor recognition of patient symptoms, delayed Emergency Medical Service (EMS) notification and delayed patient intervention in rural, geographically challenged regions will significantly enhance the availability and quality of care in my district. Geographic barriers and the need for parity with urban communities play significant roles in planning as local and state leaders work together to address needs and promote partnerships to meet those needs. This proposal offers an approach that traverses physical boundaries while offering facilities in my district the opportunity to provide enhanced healthcare services through partnerships with cutting-edge research and treatment facilities such as the University of Virginia.

I am pleased that UVA has reached out to facilities in my district to participate in this proposal, and I encourage the FCC to provide the funding needed to turn this dream into a reality.

Sincerely,

Harvey B. Morgan



COMMONWEALTH OF VIRGINIA
HOUSE OF DELEGATES
RICHMOND

ROBERT J. WITTMAN
HOUSE OF DELEGATES
DISTRICT 11
NORTH FARM ROAD
NORTH FARM DISTRICT

COMMITTEE ASSIGNMENTS
TRANSPORTATION
AGRICULTURE, FORESTRY AND
NATURAL RESOURCES
MILITIA, POLICE AND PUBLIC SAFETY

May 3, 2007

Karen S. Rhenbun MD
Professor of Pediatrics
Medical Director, Office of Telemedicine
PO Box 800711
UVA Health System
Charlottesville, VA 22908

Dear Dr. Rhenbun,

I am writing today in support of the application submitted by the University of Virginia's Office of Telemedicine for pilot grant funding for the Rural Healthcare Support Mechanism. As a member of the Virginia House of Delegates I support efforts to enhance the deployment of broadband in the service of healthcare for our citizens.

As you may already be aware, much of the area that I represent has been declared medically underserved. The expansion in the use of broadband to transmit medical information has the ability to greatly increase the quality of medical care given to my constituents. With this technology there is better connectivity amongst our state's healthcare professionals, patients, hospitals and clinics. This is especially important when working patients that have existing medical conditions, such as a stroke.

Knowing that UVA offers clinical services through its telemedicine program in more than forty specialties and subspecialties makes them an ideal candidate for this funding and a true asset to our constituents. By adding the proposed stroke intervention, prevention and education network to what is already covered in the Virginia Telehealth Network will make Virginia a leader in Telehealth care. With warm wishes and kind regards, I remain

Sincerely,

Robert J. Wittman,
Virginia House of Delegates

05/02/2007 23:41 7577872749

POULSON NORTMAN LEWIS

PAGE 02/03



COMMONWEALTH OF VIRGINIA
HOUSE OF DELEGATES
RICHMOND

EDWARD W. LEWIS, JR.
22201 FRONT STREET
POST OFFICE BOX 100
ARCONNE, VIRGINIA 22901
ONE HUNDREDFIFTH DISTRICT

COMMITTEE MEMBERSHIP
FOUNDED
AGRICULTURE, CHESAPEAKE AND
NATURAL RESOURCES
WATER, POLICE AND PUBLIC SAFETY

May 3, 2007

Karen S. Rhee, MD
Professor of Pediatrics
Medical Director, Office of Telemedicine
P.O. Box 800711
UVA Health System
Charlottesville, Virginia 22908

Dear Dr. Rhee:

I am writing to support the application of the University of Virginia Office of Telemedicine for pilot grant funding for the Rural Healthcare Support Mechanism.

I serve on the House Finance Committee. My district is largely rural. Funding the deployment of broadband is one of my top priorities, and you have my fullest support in your efforts to enhance the deployment of broadband in the service of healthcare for our Virginia citizens.

The proposal you offer makes access to education and prevention programs a priority. This is also a priority for the citizens of Virginia's Eastern Shore. We envision opportunities for employees to access health education at the workplace, as well as home, if this proposal is successful. In addition, the component of the proposal, which provides access to specialty care, is vital to our citizens as well. The medical leadership on the Eastern Shore has an outstanding working relationship with their counterparts in the rural parts of Southwest and Southeast Virginia. This network will greatly enhance this exchange of ideas and information. Finally, with potential influenza epidemics, having the ability to share information and access data will be critical to containing the spread of the flu or other virus.

Since its inception in 1985, the University of Virginia has made great strides to bring specialty care services to our rural citizens; our goal is to further advance the connectivity amongst our states healthcare professionals, patients, hospitals and clinics. An expansion of the broadband footprint to regions of Virginia with limited connectivity and in parallel, increasing access to clinical and health related educational services across that infrastructure is crucial to these efforts.

CONTACT: (703) 707-4000 - RICHMOND (804) 690-1000 - EMAIL: DELLAWP@HOUSE.STATE.VA.US

05/02/2007 23:41 7577872749

POLLSON NORTHAM LEW

PAGE 03/03

Karen S. Roush, MD

May 3, 2007

Page 2

Knowing that UVA offers clinical services through its telemedicine program in more than thirty specialties and subspecialties is of great importance to our constituents. Adding this proposed stroke intervention, prevention and education network to the armamentarium of the Commonwealth's academic health centers and community hospitals through the Virginia Telehealth Network will propel us towards attainment of our health-related goals.

Sincerely,


Lyndwood W. Lewis, Jr.
100th District



Marilyn B. Tenenover
Secretary of Health and Human Resources

Amos P. Clinger
Secretary of Technology

May 2, 2007

Karen S. Rheuban MD
Senior Associate Dean for CME and External Affairs
Medical Director of Telemedicine
University of Virginia Health System
P. O. Box 800707
Charlottesville VA 22908

Dear Dr. Rheuban:

We want to thank you for all that you and the LVA Office of Telemedicine have done to advance telehealth in Virginia. We very much appreciate your excitement, enthusiasm and willingness to partner with the Commonwealth in response to the Rural Health Care Pilot Program. As you know, Virginia has taken a bold and ambitious approach to advancing technology development. We also desire to be bold in our approach to using technology to advance access to quality health care for all Virginians.

As you well know, the Virginia Department of Health has been instrumental in bringing together stakeholders to assess the present telehealth infrastructure and capacity in Virginia and to think strategically about how to improve the same. This has resulted in a strategic plan for telehealth in the Commonwealth that calls for a statewide integrated telehealth network, the Virginia Telehealth Network (VTN).

We see the Rural Health Care Pilot Program as a perfect opportunity to further solidify the partnership between Technology and Health and to jumpstart the Virginia Telehealth Network. Should Virginia be selected to receive funds through the Rural Health Care Pilot Program, the Administration would support the inclusion of state funds in the 2008 – 2010 biennial budget for administration, marketing, and program evaluation of the Virginia Telehealth Network and its activities.

Karen S. Rhesan MD

May 2, 2007

Page 2 of 2

The telestroke initiative, as described in your Rural Health Care Pilot Program proposal, is a great starting point to a much broader telehealth vision that includes telehealth education, electronic medical records, clinical telemedicine, emergency medical services, and more. Again, we thank you for all your work and willingness to support this partnership.

Sincerely,



Marilyn B. Tavernier
Secretary of Health & Human Resources



Anand P. Chopra
Secretary of Technology

MBT/aac



COMMONWEALTH OF VIRGINIA

Department of Health

RICHMOND, VA 23218

May 1, 2007

ROBERT B. STROUSE, MD, M.P.H.
STATE HEALTH COMMISSIONER

Karen S. Rabinson, MD

Senior Associate Dean for CME and External Affairs

Medical Director, Office of Telemedicine

University of Virginia Health System

P.O. Box 800707

Charlottesville, VA 22908

TTY 7 555-0811
1-800-828-1120

I want to take this opportunity to say what a pleasure it has been to work with you over the past four years as we laid the foundation for the Virginia Telehealth Network (VTN). As you well know, the VDH Office of Health Policy and Planning has as its mission "to improve access to quality health care for all Virginia residents". Our office functions as our State Office of Rural Health, State Primary Care Office, and State Office of Minority Health. Consequently we partner closely with our VDH colleagues in the Office of Emergency Medical Services, the Emergency Preparedness and Response Program, the Office of Epidemiology, Division of Disease Prevention, and the Office of Family Health Services Division of Chronic Disease Prevention and Control. Every one of these Offices has a vested interest in the advancement of telehealth in Virginia.

I can't even begin to express how excited we are about this FCC Rural Health Care Pilot Program opportunity and the potential it has as a catalyst for making the VTN vision a reality. You and all your colleagues at the University of Virginia Office of Telemedicine have been invaluable partners in delivering services in medically underserved areas, and have gone above and beyond as partners to the improvement of the current telehealth infrastructure and utilization in the Commonwealth. I look forward to many more years working with all of you to improve access to quality health care for all Virginia residents!

Sincerely,

Kathy H. Watbury, Ph.D.

Kathy H. Watbury, Ph.D.

Acting Office Director

Virginia Department of Health

Office of Health Policy and Planning





CIT BROADBAND

CENTER FOR INNOVATIVE TECHNOLOGY

May 3, 2007

Karen S. Rhenan MD
Professor of Pediatrics
Medical Director, Office of Telemedicine
PO Box 800711
UVA Health System
Charlottesville, VA 22908

Dear Dr. Rhenan,

I am writing to support the application of the University of Virginia Office of Telemedicine for pilot grant funding for the Rural Healthcare Support Mechanism.

As Vice President of Broadband Programs for the Center for Innovative Technology and the Director of the Commonwealth's Office of Telework Promotion and Broadband Assistance, I wholeheartedly endorse this application and pledge my full commitment to making the VAST network a successful and sustainable endeavor.

The VAST program is in direct alignment with the broadband deployment work being done by my office and healthcare initiatives being carried out across the Commonwealth. Uniquely positioned, VAST has the potential to deliver the double benefit of enhancing the Commonwealth's broadband footprint while simultaneously expanding quality healthcare services to a greater proportion of Virginia's citizens.

CIT is a long-time supporter of the UVA telemedicine program and I planned to be able to offer my support for your latest endeavor. I applaud the foresight and planning that has gone into design of the VAST network. The clinical and technical aspects of proposed by VAST demonstrate that it is indeed possible to meet the needs of the citizenry through partnerships and the leveraging of assets. Your team has configured a technologically forward thinking "hybrid" approach that embraces emerging technologies, while remaining open enough in its architecture to accommodate numerous connectivity, maintenance, and service configurations. I believe that this configuration coupled with your top-notch team positions VAST to be a successful and sustainable endeavor.

Sincerely,

2214 Rock Hill Road
Suite 600
Harrison, VA 20190-4210
T | 703 689 3000
F | 703 689 3041
W | www.cit.org


Karen R. Jackson

**COMMONWEALTH of VIRGINIA***Department of Medical Assistance Services*PATRICK W. FINNERTY
DIRECTOR

May 1, 2007

SUITE 1300
100 EAST BROAD STREET
RICHMOND, VA 23219
(804) 788-7600
(804) 942-0800 (TDD)

Karen S. Rheuban, MD
Senior Associate Dean for CME and External Affairs
Medical Director of Telemedicine
University of Virginia Health System
P. O. Box 800707
Charlottesville VA 22908

Dear Dr. Rheuban:

The Virginia Department of Medical Assistance Services (DMAS) welcomes the opportunity for the further expansion of telehealth services through this proposed statewide stroke initiative.

The grant funds available from the Federal Communications Commission allow the Commonwealth to expand and strengthen the telehealth infrastructure for the delivery of healthcare services. Those persons suffering from stroke and its co-morbidities, such as heart disease, will benefit from this infrastructure through greater access to education and prevention programs as well as specialty care for diagnosis and treatment. DMAS is aware that in the proposed statewide stroke initiative, there are applications that utilize store and forward technology. DMAS is interested in exploring these and other opportunities that could lead to better health outcomes, while enhancing the sustainability of telehealth service providers.

DMAS has covered select telehealth services since 1995. This coverage was initially a pilot project and then expanded statewide in 2003. DMAS has worked closely with you and the University of Virginia Office of Telemedicine and participated actively in the strategic planning process for the development of the Virginia Telehealth Network. DMAS looks forward, under the grant, to continuing this partnership to shape the telehealth infrastructure for optimally meeting the needs of stroke patients in Virginia.

Sincerely,

A handwritten signature in dark ink, appearing to read "PW Finnerty".

Patrick W. Finnerty

PWF/jo



JOHNSTON MEMORIAL
HOSPITAL

April 23, 2007

Karen S. Rheuban, MD
Senior Associate Dean for CME and External Affairs
Medical Director of Telemedicine
University of Virginia Health System
PO Box 800707
Charlottesville, Virginia 22908

Dr. Rheuban,

I am writing to offer my support for the University of Virginia Office of Telemedicine's proposal to the Federal Communications Commission in response to its recent Report and Order to encourage greater utilization of the Universal Service Fund for Rural Health Care Providers.

Johnston Memorial Hospital is proud to be a partner in this endeavor. Being located in a rural area, we know first hand that greater access to education and prevention programs, as well as specialty care where not locally available, is imperative. Through the use of acute stroke diagnosis and therapy (including the judicious administration of thrombolytic agents) and by connecting the Commonwealth's primary stroke centers, academic medical centers, community hospitals, and community health centers we will be able to offer citizens in our service area diagnostic and treatment options currently reserved for those in metropolitan markets.

In addition, we are pleased to have the opportunity to partner with the University of Virginia and the Commonwealth to create an environment and infrastructure through which the exchange of medical information within health care systems and across systems in regional health information organizations will be facilitated.

Again, thank you for the opportunity to participate in this proposal. We look forward to a favorable decision from the FCC and to collaborating in the future.

Sincerely,

Sean McMurray
CEO

**CLINCH RIVER HEALTH SERVICES, INC.**

GARY E. MICHAEL, M.D.
TODD A. CARROLL, M.D.
SABRINA MITCHELL, F.N.P.
CAROLYN S. BOWEN, EXECUTIVE DIRECTOR

ROUTE 1, BOX 20
CLINTON, VA 22025
TELEPHONE: (276) 467-3364
FAX: (276) 467-4573

April 20, 2007

Karen S. Rhesan, MD
Senior Associate Dean for CME and External Affairs
Medical Director of Telemedicine
University of Virginia Health System
P O Box 800707
Charlottesville, VA 22908

Dear Dr. Rhesan:

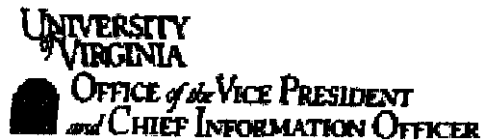
Clinch River Health Services is very eager to support the worthwhile effort by the University of Virginia to submit a proposal to the Federal Communications Commission. With almost thirty years of rural health service, Clinch River Health Services has seen the early years of limited medical technology with limited medical access, and then the later years of advanced medical technology, but with the continued limited medical access. Previous efforts by UVA have allowed Clinch River Health Services to tap some of the resources at UVA via Telemedicine referral. The new endeavor of starting the Telepsychiatry partnership between Clinch River Health Services and UVA hopefully will fill the deep void of advanced Mental Health Care lacking in rural areas. Our community, Civic groups, and local leaders have been very impressed by and responsive to these efforts.

However, there is so much more to be achieved in raising the level of care in our rural areas. Some examples are providing an educational link, an emergency alert system, and an information conduit for the rural providers, who are the backbone of our rural health system. Coordination of efforts to reduce disparities, target disease entities with high morbidity and mortality, identify and connect our rural patients to educational and ancillary services such as nutrition, risk behavior modification, retinopathy screening. Every effort to expand and heighten telecommunications with rural areas brings us closer to developing a healthier, stronger, and more progressive community.

Sincerely,

Carolyn Bowen
Carolyn Bowen
Executive Director, CRHS

Gary E. Michael, MD
Gary E. Michael, MD
Medical Director, CRHS



May 2, 2007

Karen S. Rheuban, MD
University of Virginia
Department of Pediatrics
PO Box 800511
McKim Hall, Rm G151A
Charlottesville, Va 22904

Dear Dr. Rheuban:

I am writing to express my enthusiastic support for The Office of Telemedicine of the University of Virginia Health System's proposal to the Federal Communications Commission. This proposal promises to facilitate enhanced access to healthcare services in the Commonwealth by expanding the existing broadband infrastructure in Virginia and in particular, by building and deploying an MPLS network (Multi Protocol Label Switching).

The goals of the proposal align well with UVA's mission and should serve the Commonwealth well. We are honored to partner with two of the Commonwealth's universities (Virginia Polytechnic Institute and State University, and Virginia Commonwealth University) as well as the relevant and key state agencies addressing healthcare and information technology to bring this project to fruition.

You have my support for this initiative.

Sincerely,

A handwritten signature in black ink, appearing to read 'James T. Hilton'.

James T. Hilton
Vice President and Chief Information Officer